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passable - but faulty, crude & uncorrected
with too many mistakes in spelling

An
Inaugural Dissertation
on
Intermittent FEVER
By

Paper March 28 1827

Robert N. Booth W. S. H.
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Intermittent Fever

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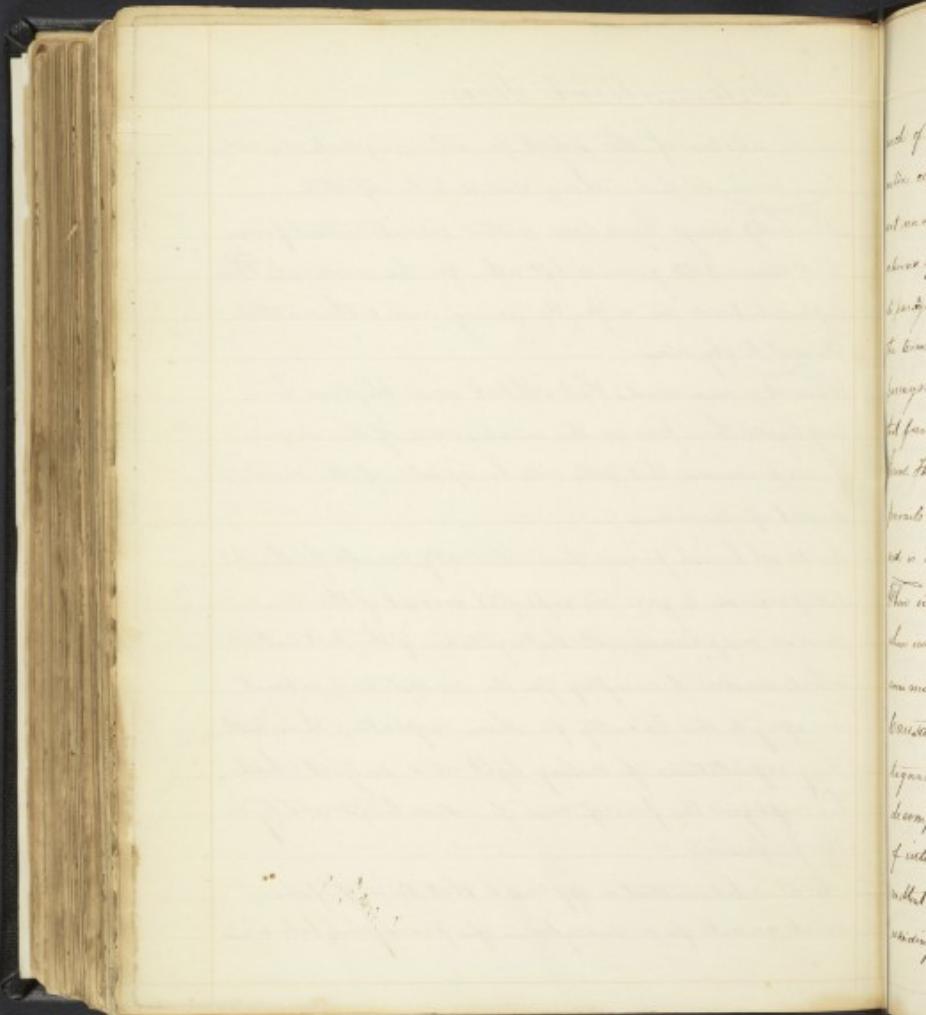
In the review of this subject for an inaugural dissertation
I have observed that nothing new is to be expected.

Numberless essays have been written on intermittent fever
and there is little ground left either for the medical Phe-
nomenon to lead on or for the young and enthusiastic
student to fly over.

When it is considered that Abbott and Blighaw have
employed their pens in the investigation of this disease
I am persuaded that little will be expected of the more
studious of medicines.

I will not however pursue these introductory remarks further, but
will proceed to give an imperfect account of the disease
now in compliance with the regulation of the Institution
which renders it necessary for the candidate to submit
an essay to the Faculty for their inspection than with
any expectation of casting light on a subject which
has employed the pens of men of acknowledged ability in
the professions.

The term Intermittent is applied to that kind of fever
which consists of a succession of paroxysms, between



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such of which there is a distinct and perfect intermission, or an entire cessation of all febrile symptoms. Therefore has received different names according to the distance of time elapsed between the return of the paroxysms. There are three forms of the disease, with its paroxysms recurring every twenty four hours, which we call Intertitus; the term Intertitus is applied to that form of the disease, where in the paroxysms return every forty eight hours and this we call Quartan; to that form, which has the return of paroxysms every seventy two hours. The tertian is the most common form of the disease and prevails mostly in the fall. The Quartan is most difficult to cure and is also most prevalent in the fall.

When intermitting fevers prevail in the Spring they are called annual, when in the fall autumnal. Annual intermitting fevers are not so common now as heretofore.

Causation. Marsh miasma, or the vapours arising from stagnant water, and from vegetable matter in a state of decomposition, are considered to be the most common cause of intermitting fevers. That these vapours act as the cause of intermitting fevers we are led to believe, from the fact that people residing in miasmatic districts are more subject to this species

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of four thousand cases without such traits of cruelty
the mode of operation is entirely unknown, the theories which
have been brought forward are entirely visionary and con-
jectural, and incompetent to the practitioner, for admitting
that they now exist and did explain the modes of operation
yet they could ^{not} tell how they act in this case of external
tuberculosis, for the causes whence they may be known to operate after
the disease is established. Though we are ignorant of
the modes of operation of marsh measnus, yet we know
what states of the body are most favourable to its action.
Constitution in a state of debility are more liable to be affected
than those in a state of strong and ripe, any thing that exhausts
or weakens the powers of the animal economy is favourable to
its operations; in this case marsh measnus would seem to be the
occasional or exciting cause, and the debility or exhausted state
of the system the predominating cause, for instance, suppose two men
should set out from Philadelphia to a mountainous district, one in
a state of debility, the other in fine riper and stronger, the former
is attacked with intermittent fever, while residing within the moun-
tain district but we should certainly call the measnus the ex-

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abey cause, the biles of the two main organs, but returning to the body, he contracts some detumescence, which weakens the systems and is then taken with fever, as this case the miasma is therefore depositing and thus detaching the exciting cause. Thus we see that miasma is either the predisposing or exciting cause of fever according to the circumstances of the case. That this certain liability or liability to be acted on by marsh miasma exists is rendered still more evident by the circumstance that some people residing in the neighbourhood of marshes appear more liable than others to become affected, which must be owing not to the want of power in the vapors, but to some peculiar state of the system.

Next to miasma cold may be considered the most common cause of intermissions. The state of the system which are favourable to the growth of miasma, are also favourable to the action of cold. There are certain circumstances attending the cold itself which render it more powerful in its operations, for instance when moist, in which appears as to steam &c it is more apt to affect the system. Cold like miasma may be either the exciting or predisposing cause, according to circumstances.
Whether in disease liability as a poor diet, mental anxiety

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great fatigues have been noticed among the occasional causes but they may also be the predisposing causes.—

Symptomat. Each paroxysm of an intermittent fever is divided into a cold, hot and sweating stage. The cold stage is ushered in with the following symptoms viz: Shivering, a sense of debility, shuddering in motion, frequent yawning and stretching, and an aversion to food. The face and extremities become pale and cold, the features ~~turn~~ the heat of every internal part is diminished, and the skin over the whole body appears constricted as if cold had been applied. In so short time these symptoms are increased, the patient feels very cold and unusual signs succeed attendant with pains in head back and joints, nausea and vomiting of bilious matters frequently occur. Respiration is frequent and anxious. Vomits pale and discharged in large quantities the thoughts confused. The pulse small frequent and irregular. In some cases drawing up and stupor prevail and end in apoplexy, but this is by no means common.

These symptoms are soon abated and other of an opposite character make their appearance. because of heat on the

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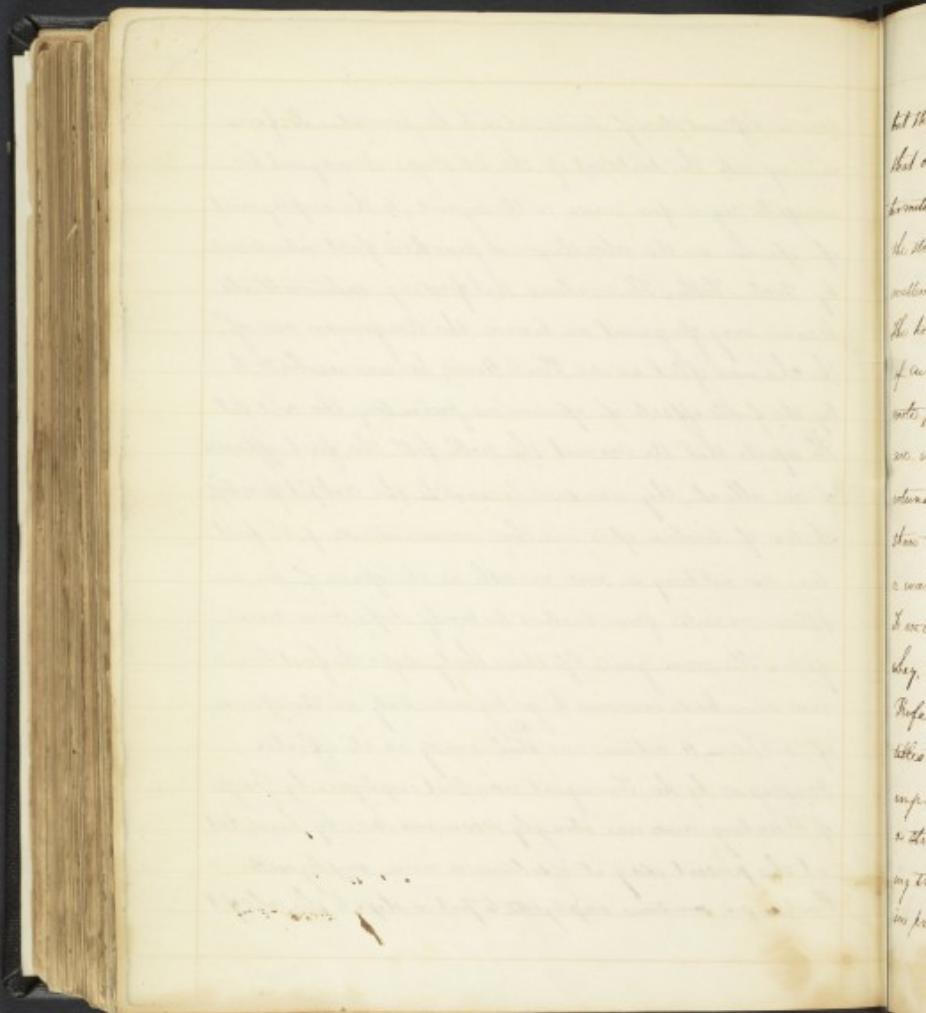
whole body, redness of the face, dryness of the skin, pains in the head, great thirst, swelling of the temporal arteries, and subspasms. The respiration at this stage is full and quick, but still frequent and anxious, the tongue dry and furrowed, the pulse unequal, but still frequent, hard and full. Delirium sometimes prevails, and generally depends upon the severity of the attack. When these symptoms have continued for sometime, they go off, and give place to others. A sneezing fits out, generally upon the forehead first, and is by degrees extended over the whole body. As the sweat continues to flow, the heat of the body becomes less, the thirst ceases, respiration is free and full, and all the functions are restored to their natural state.

Treatment. The three forms of the disease which have been spoken of, generally demand the same treatment, I shall therefore speak of them separately but collectively. The different stages require different treatment. During the 1st stage, the patient is put to bed and external warmth is applied, cold blisters to the feet and sides, warm drinks are also given, such as sugar tea and the like. It is kept as comfortable as possible, by laying on large quantities of loose clothes, until the 1st stage is brought to an

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where a different plan of treatment is to be pursued. Before entering into the treatment of the hot stage it may not be amiss to say a few words with regard to the employment of opium in the cold stage - a practice first introduced by Dr. W. H. Miller. He mentions that finding intermissions became very frequent on board the *Venice*, one of the chariot flats under Earl Howe, he was resolved to try the full effects of opium in preventing the cold fit. He avers that the moment the sick fell the first symptom of an attack, they were sent to the cockpit for a glass. A dose of tincture opii was then administered, if the first dose did not bring on some warmth no the spaces of two or three minutes from twelve to twenty steps more would give it. It never gave off than thirty steps the first time and never had occasion to go beyond forty in the spaces of an hour, so certain was that remedy in its effects.

Camphor by the Tourniquet was first employed by George of Edinburgh and was strongly recommended by him, but at the present day it is seldom a mere employment. Camphor is sometimes employed to put a stop to the cold fit



but the practice is by no means general. It appears to me that enemas are highly useful now the other stage of an intermittent, particularly if the disease is genuine originate in the stomach, by discharging from this impudent organ, its irritability will be removed, it may fit for the reception of the bark.

The hot stage next demands our attention. The indications of cure are two. First to remove irritation. Secondly to promote perspiration. To effect the first of these intentions emetics are employed. Something however, sometimes better plan is voluntarily, and if it does nothing more necessary than to encourage it by giving a little camomile tea in warm water.

To excite perspiration, deaphaeties are employed, as now why, Spiraea ulmaria is strongly recommended by Professor Chapman, which circumstances above enables it to the utmost confidence. Opium has been employed likewise in the hot fit. He too finds no good strong advocate for it. He tells us that if taken during the intermissions it has not the best effect either in preventing or mitigating the succeeding paroxysm.

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when given in the cold fit, it takes a longer time to remove it, but that when administered half, an hour after the commencement of the fit it generally appears affording immediate relief.

In intermissions attended with inflammation, as a strong yet pale flushed countenance laborious respiration pain in the head and chest, emetics must be actively employed, the alimentary canal must be thoroughly evacuated with the most active cathartics, but not I would prefer to any other because it is better calculated to prevent fermentations of the liver and spleen which almost invariably succeed elaborate intermissions. Having evacuated the alimentary canal of its irritating contents we must endeavor to prevent the occurrence of the next expected paroxysm. To effect our purpose the Peruvian bark is to be employed. It is best given in substance, and when the stomach will bear it, it should always be preferred; if, however, powder nowise being a fit object, and infusing a decoction may be substituted. Aromatic bitters combined with the bark frequently do away its unpleasant effects, render it not so

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tumors and growths around his person are. When the bark will fit on the stomach, Doctor Thomas recommends injecting bark jacket. The bark sometimes purges; a few drops of Laudanum counteracts this effect, & sometimes passes water, & mild laxatives obviate this tendency. A great diversity of opinion exists as to the proper period of giving the bark, this author is in favor of giving it as near as possible to the next expected paroxysm while others assert that the bark should be given at as great a distance as possible from the next expected paroxysm, the latter practice is considered best.

Besides the Peruvian bark, various other remedies have been employed to prevent a return of paroxysm.

Before leaving the subject of the bark I will introduce the sal volatile of quinine, one of its preparations. Of late years the medicine has been extensively employed in intermittents, but not generally with the same happy results as the bark in substance. It is given either in powder or pills, the latter form is generally adopted on account of its volume. The
of Dr. Br. Johnson's preparation of Arsenic is an old

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untry in this disease, but at the present day is now employed except in cases where all other remedies have failed.

The other remedies of inferior value are the following by Captain's proportion; the different species of, degummed, of which the burns flax is considered the best. *Tamus communis*, black elder, white oak bark, white cotton, *Lutiparia bicolorata*, *Nora* and *scar* have been known to prevent the passage, change of climate is very beneficial sometimes in the cure of intermittents of long standing.

Why is arsenic not adverted to?

